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PTO/SB/01 (10-00)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

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**DECLARATION
AND
POWER OF ATTORNEY
FOR UTILITY OR DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

Declaration Submitted with Initial Filing Declaration Submitted after Initial Filing (Surcharge (37 CFR 1.16(e)) required)
OR

Attorney Docket Number	DEP 5305USPCT
First Named Inventor	REVIE
COMPLETE IF KNOWN	
Application Number	10/598,626
Filing Date	09/06/2006
Group Art Unit	TBD
Examiner Name	TBD

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

ORTHOPAEDIC OPERATING SYSTEMS, METHODS, IMPLANTS AND INSTRUMENTS
(Title of the Invention)

the specification of which

is attached hereto
OR

was filed on (03/10/2005) as PCT International Application Number
PCT/GB05/00933 and was amended on (MM/DD/YYYY)

*I reviewed the contents of the application
on 03/10/2005 and have not reviewed since
that date. At that review, understood
the contents of the
identified specification.*

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> YES <input type="checkbox"/> NO

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

DECLARATION - Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/028 attached hereto

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application and the national or PCT International filing date of this application:

Application Serial No.	Filing Date	Status
		Patented
		Patented
		Patented

I hereby appoint:

Practitioners at Customer Number 000027777

Place Customer
Number Bar Code
Label Here

AND

Practitioner(s) named below:

Name _____

Registration Number _____

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Address all telephone calls to Brian S. Tomko at telephone number (732) 524-1239.

Direct all correspondence to:	Customer Number <input checked="" type="checkbox"/> or Bar Code Label	<u>000027777</u>	OR	<input type="checkbox"/> Correspondence address below
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Name: _____

Address: _____

Address: _____

City:	State:	ZIP:
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Country	Telephone:	Fax:
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) IAN		Family Name or Surname REVIE	
Inventor's Signature 	I REVIEWED in MARCH 2005 AND HAVE NOT REVIEWED SINCE THAT DATE. I UNDERSTAND THAT THE CONTENTS ARE AS OF THAT DATE.		Date 3RD AUGUST 2007
Residence: City Boroughbridge	State North Yorkshire	Country UK	Citizenship UK

Mailing Address Tutt House, New Row

City Boroughbridge	State	ZIP YO51 9AX	Country UK
--------------------	-------	--------------	------------

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) ALAN		Family Name or Surname ASHBY	
Inventor's Signature		Date	
Residence: City York	State North Yorkshire	Country UK	Citizenship UK

Mailing Address 19 Clifton Green

City York	State North Yorkshire	ZIP YO30 6LN	Country UK
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NAME OF THIRD INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) THORSTEN		Family Name or Surname BURGER	
Inventor's Signature		Date	
Residence: City Muenchen	State	Country Germany	Citizenship German

Mailing Address Speyerstr. 8

City Muenchen	State	ZIP 80804	Country Germany
---------------	-------	-----------	-----------------

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NAME OF SOLE OR FOURTH INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) STEFAN		Family Name or Surname VILSMEIER	
Inventor's Signature		Date	
Residence: City Kufstein	State	Country Austria	Citizenship GERMAN
Mailing Address Oberer Stadtplatz 6			
City Kufstein	State	ZIP 6330	Country Austria
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NAME OF FIFTH INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) ASSAF		Family Name or Surname GOVARI	
Inventor's Signature		Date	
Residence: City Haifa	State	Country Israel	Citizenship Israel
Mailing Address Vitzo 1			
City Haifa	State	ZIP	Country Israel
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NAME OF SIXTH INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) DUDI		Family Name or Surname REZNICK	
Inventor's Signature		Date	
Residence: City Shimshit	State	Country Israel	Citizenship Israel
Mailing Address Peleg 33 st.			
City Shimshit	State	ZIP POB: 17906	Country Israel

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NAME OF SEVENTH INVENTOR:	<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any]) PESACH		Family Name or Surname	SUSEL
Inventor's Signature	Date		
Residence: City Haifa	State	Country Israel	Citizenship Israel
Mailing Address 43 Varida St.			
City Haifa	State	ZIP	Country Israel
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF EIGHTH INVENTOR:	<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any]) AVI		Family Name or Surname	SHALGI
Inventor's Signature	Date		
Residence: City Tel Aviv	State	Country Israel	Citizenship Israel
Mailing Address Kashani 3 rd st., Ramat Aviv Gimel			
City Tel Aviv	State	ZIP 69499	Country Israel

Please type a plus sign (+) inside this box

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DECLARATION AND POWER OF ATTORNEY FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)		Attorney Docket Number	DEP 5305USPCT	
		First Named Inventor	REVIE	
		COMPLETE IF KNOWN		
		Application Number	10/598,626	
<input type="checkbox"/> Declaration Submitted with Initial Filing <input checked="" type="checkbox"/> Declaration Submitted after Initial Filing (Surcharge (37 CFR 1.16(e)) required) OR		Filing Date	09/06/2006	
		Group Art Unit	TBD	
		Examiner Name	TBD	
As a below named inventor, I hereby declare that: My residence, mailing address, and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: ORTHOPAEDIC OPERATING SYSTEMS, METHODS, IMPLANTS AND INSTRUMENTS <i>(Title of the Invention)</i>				
the specification of which <input type="checkbox"/> is attached hereto OR <input checked="" type="checkbox"/> was filed on (03/10/2005) as PCT International Application Number PCT/GB05/00933 and was amended on (MM/DD/YYYY) <input type="text"/>				
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.				
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT International filing date of the continuation-in-part application.				
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT International application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT International application having a filing date before that of the application on which priority is claimed.				
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
<input type="checkbox"/> Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:				

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Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/028 attached hereto.

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

Application Serial No.	Filing Date	Status
10/123456789	2010-01-01	Patented
10/123456789	2010-01-01	Patented
10/123456789	2010-01-01	Patented

I hereby appoint:

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Number Bar Code

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☒ Practitioners at Customer Number 000027777

AND

Practitioner(s) named below:

Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

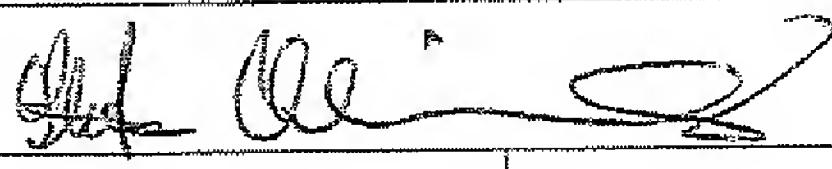
Address all telephone calls to Brian S. Tomko at telephone number (732) 524-1239.

Direct all correspondence to:	Customer Number <input checked="" type="checkbox"/> or Bar Code Label	000027777	OR	<input type="checkbox"/> Correspondence address below
Name: <hr/> Address: <hr/> Address: <hr/>				
City:	State:	ZIP		
Country	Telephone:	Fax:		

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) IAN		Family Name or Surname REVIE	
Inventor's Signature		Date	
Residence: City Boroughbridge	State North Yorkshire	Country UK	Citizenship UK
Mailing Address Tuff House, New Row			
City Boroughbridge	State	ZIP YO51 9AX	Country UK
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NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) ALAN		Family Name or Surname ASHBY	
Inventor's Signature		Date 14 August 2007	
Residence: City York	State North Yorkshire	Country UK	Citizenship UK
Mailing Address 19 Clifton Green			
City York	State North Yorkshire	ZIP YO30 6LN	Country UK
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF THIRD INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) THORSTEN		Family Name or Surname BURGER	
Inventor's Signature		Date July 19, 2007	
Residence: City Muenchen	State	Country Germany	Citizenship German
Mailing Address Speyerstr. 8			
City Muenchen	State	ZIP 80804	Country Germany

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FOURTH INVENTOR:	<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any]) STEFAN	Family Name or Surname	VILSMEIER	
Inventor's Signature 	Date		
Residence: City Kufstein	State	Country Austria	Citizenship GERMAN
Mailing Address Oberer Stadtplatz 6			
City Kufstein	State	ZIP 6330	Country Austria
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF FIFTH INVENTOR:	<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any]) ASSAF	Family Name or Surname	GOVARI	
Inventor's Signature	Date		
Residence: City Haifa	State	Country Israel	Citizenship Israel
Mailing Address Vitzo 1			
City Haifa	State	ZIP	Country Israel
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NAME OF SIXTH INVENTOR:	<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any]) DUDI	Family Name or Surname	REZNICK	
Inventor's Signature	Date		
Residence: City Shimshit	State	Country Israel	Citizenship Israel
Mailing Address Peleg 33 st.			
City Shimshit	State	ZIP POB: 17906	Country Israel

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NAME OF SOLE OR FOURTH INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) STEFAN		Family Name or Surname VILSMEIER	
Inventor's Signature		Date	
Residence: City Kufstein	State	Country Austria	Citizenship GERMAN
Mailing Address Oberer Stadtplatz 6			
City Kufstein	State	ZIP 6330	Country Austria
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF FIFTH INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) ASSAF		Family Name or Surname GOVARI	
Inventor's Signature		Date 17/09/07	
Residence: City Haifa	State	Country Israel	Citizenship Israel
Mailing Address Vitzo 1			
City Haifa	State	ZIP	Country Israel
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF SIXTH INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) DUDI		Family Name or Surname REZNICK	
Inventor's Signature		Date	
Residence: City Shimshit	State	Country Israel	Citizenship Israel
Mailing Address Peleg 33 st.			
City Shimshit	State	ZIP POB: 17906	Country Israel



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NAME OF SOLE OR FOURTH INVENTOR:	<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle (if any)) STEFAN		Family Name or Surname	VILSMEIER
Inventor's Signature		Date	
Residence: City Kufstein	State	Country Austria	Citizenship GERMAN
Mailing Address Oberer Stadtplatz 6			
City Kufstein	State	ZIP 6330	Country Austria
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NAME OF FIFTH INVENTOR:	<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle (if any)) ASSAF		Family Name or Surname	GOVARI
Inventor's Signature		Date	
Residence: City Haifa	State	Country Israel	Citizenship Israel
Mailing Address Vilzo 1			
City Haifa	State	ZIP	Country Israel
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF SIXTH INVENTOR:	<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle (if any)) DUDI		Family Name or Surname	REZNICK
Inventor's Signature		Date 23	7 07
Residence: City Shimshit	State	Country Israel	Citizenship Israel
Mailing Address Peleg 33 st.			
City Shimshit	State	ZIP POB: 17906	Country Israel

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NAME OF SEVENTH INVENTOR:	<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any]) PESACH	Family Name or Surname	SUSEL	
Inventor's Signature	Date 18/09/2007		
Residence: City Haifa	State	Country Israel	Citizenship Israel

Mailing Address 43 Varida St.

City Haifa	State	ZIP	Country Israel
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF EIGHTH INVENTOR:	<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any]) AVI	Family Name or Surname	SHALGI	
Inventor's Signature	Date		
Residence: City Tel Aviv	State	Country Israel	Citizenship Israel

Mailing Address Kashani 3rd st., Ramat Aviv Gimel

City Tel Aviv	State	ZIP 69499	Country Israel
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NAME OF SEVENTH INVENTOR:	<input type="checkbox"/> A petition has been filed for this unsigned inventor
---------------------------	---

Given Name (first and middle [if any]) PESACH	Family Name or Surname SUSEL
--	---------------------------------

Inventor's Signature	Date
-------------------------	------

Residence: City Haifa	State	Country Israel	Citizenship Israel
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Mailing Address 43 Varida St.

City Haifa	State	ZIP	Country Israel
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NAME OF EIGHTH INVENTOR:	<input type="checkbox"/> A petition has been filed for this unsigned inventor
--------------------------	---

Given Name (first and middle [if any]) AVI	Family Name or Surname SHALGI
---	----------------------------------

Inventor's Signature	Date Sep 13, 2007
-------------------------	-------------------

Residence: City Tel Aviv	State	Country Israel	Citizenship Israel
--------------------------	-------	----------------	--------------------

Mailing Address 32 Shlomo Ben-Yosef st., Ramat Aviv Gimel

City Tel Aviv	State	ZIP 69125	Country Israel
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